

THIS ISSUE

- **Vocational Rehabilitation Rule Changes**
- **Referrals for Stand Alone & Provisional Job Analysis**

TO:
Vocational Rehabilitation Providers
Occupational Therapists
Physical Therapists
Physical Therapy Clinics
Occupational Therapy Clinics

CONTACT:

Provider Toll Free
1-800-848-0811
902-6500 in Olympia

Mary Kaempfe
Medical Program Specialist
PO Box 44322
Olympia WA 98504-4322
360-902-6811

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Purpose

This bulletin:

- Explains the changes made recently to Chapter 296-19A of the Washington Administrative Code (WAC) concerning the provision of vocational rehabilitation services,
- Details a new referral type, the Stand Alone Job Analysis,
- Explains the use of job analyses in provisional claims
- Educates providers on important dates relating to the implementation of the new rules,
- Lists additional resources available from the department to assist providers in understanding and adjusting to these changes.

While this bulletin applies to referrals from both the State Fund and Self-Insured employers, the sections relating to Stand Alone and Provisional Job Analyses only relate to State Fund referrals.

For more information on the implementation schedule for the changes, or to obtain a copy of the new rules, please see the department's vocational services website at: <http://www.lni.wa.gov/hsa/voc/default.htm>.

Why did the department make these changes?

The department received input from many stakeholders during the rulemaking process on chapter 296-19A WAC. The input was reviewed and considered during the preparation of the proposed and final amendments to chapter 296-19A WAC. Based upon this input, the department found that chapter 296-19A-WAC could be improved by:

- Clarifying the statutory and regulatory requirements pertaining to vocational rehabilitation services;
- Updating definitions that were not consistent with current practices, best practices, and case law; and
- More clearly describing the department's expectations for service delivery and reports prepared by private sector providers.

What changes did the department make by amending chapter 296-19A WAC?

Below is an overview of the major changes made to chapter 296-19A WAC, **take effect February 1, 2004**, unless otherwise stated (a complete list of the changes, and the rationales for those changes, can be found at <http://www.lni.wa.gov/hsa/voc/default.htm>). Also, interested parties may contact the department's Health Services Analysis division at (360) 902-6799 to request a copy of the Concise Explanatory Statement (CES) from the 2002-2003 rule making process on chapter 296-19A WAC.

Until the amended rules become effective, the existing chapter 296-19A remains in effect.

Another Provider Bulletin will be sent later this year to provide more details on these changes. In addition, the department is planning a workshop for September 26, 2003 that will include training on some of the issues and changes associated with the amended rules.

Qualifications:

- WAC 296-19A-210: vocational rehabilitation providers now have until November 30, 2010 to obtain one of the required professional certification credentials (CDMS, CRC, ABVE).
- To supervise interns or provide forensic services, vocational providers must have five (5) years experience working directly with Washington industrially injured or ill workers. Vocational providers who have been previously approved to provide forensic services will continue to be qualified to provide these services.

Forensic referrals:

WAC 296-19A-125 through WAC 296-19A-135, govern forensic referrals. These sections have been amended and new sections have been developed to clarify service and reporting requirements.

Corrective Action(s):

New sections were created in WAC 296-19A-270 to clarify circumstances in which the department can take corrective action(s) against vocational providers.

Interns:

- WAC 296-19A-210(4)(e) explains a vocational provider's internship is limited to 72 months, including the one year allowed to obtain the required credential.
- WAC 296-19A-210(1)(c) clarifies that interns can not directly receive, or be assigned, referrals.

Job modifications and pre-job accommodations:

WAC 296-19A-180 through WAC 296-19A-200 were clarified by moving the requirements from policy to rule.

Electronic security:

WAC 296-19A-210(6) explains that vocational providers must comply with all electronic security requirements for accessing department files.

Responsibilities of vocational providers:

- WAC 296-19A-210(1)(c) and WAC 296-19A-210(5) explain the responsibilities of supervisors, VRCs assigned to referrals, and interns.
- WAC 296-19A-210(1)(c) establishes that the VRC assigned to a referral is responsible for work performed by all providers who complete vocational services on that referral. This may include an occupational or physical therapist who provides work evaluation.

Report distribution:

- The department will no longer be required to send closing reports to employers after February 1, 2004.
- WAC 296-19A-030(5) allows vocational providers to submit copies of reports and attachments, upon request, to the injured worker or their representative.

Stand Alone Job Analyses

In the amended WAC 296-19A-137, the department established a new referral type for a Stand Alone Job Analysis effective July 1, 2003. This type of referral authorizes a vocational provider to conduct a job analysis when no other services are requested. The department intends to begin making these referrals approximately August 1, 2003.

A Stand Alone Job Analysis is a referral authorized by the department after a claim has been allowed. The product of this referral may be used in situations where the department needs job analysis information to adjudicate a claim. The department anticipates that the implementation of this new type of referral will contribute to quicker vocational and claim decisions.

Per WAC 296-19A-137, the provider must conduct the job analysis on-site whenever possible and must address all elements described in WAC 296-19A-170. The vocational provider will send the completed job analysis to the claim manager. The provider should *not* send the job analysis to the attending physician or an independent medical examiner.

The referral for this service will be made in the same manner as other vocational referrals, i.e. to a firm for subsequent assignment to a vocational rehabilitation counselor (VRC), or directly to a VRC. The department or the assigned VRC may request the assistance of other disciplines (e.g. physical or occupational therapists) in completing the job analysis. The assigned VRC is responsible for all work performed on a referral.

What are the authorization requirements?

This service is authorized at the department's discretion. A provider may not authorize this service. This type of referral will not be made during an open vocational referral.

When is a Stand Alone Job Analysis due?

Per WAC 296-19A-137, a vocational provider who accepts a Stand Alone Job Analysis referral must **complete and submit** it to the department within 15 calendar days from the date the claim manager creates the electronic referral. If 15 days have passed and the job analysis has not been completed, the assigned VRC must enter the appropriate outcome recommendation code and contact the claim manager. Bills for dates of service beyond the authorized 15 days will not be paid.

What are the documentation and record keeping requirements?

The requirements for documentation and record keeping are described in WAC 296-19A-400. These are the same for any referral.

Is this referral type subject to CACO?

The department does not intend to incorporate the Stand Alone Job Analysis referral type into its provider performance measurement ratings at this time.

What recommendation codes are available for providers?

Recommendation/Outcome:	Definition
JA01: Job analysis is complete.	The service has been completed and the job analysis has been sent to the department.
JA02: Job analysis is incomplete.	<p>The provider attempted to, but did not, complete the the job analysis. This outcome is not to be used in the situations covered under the administrative outcomes listed below. Some examples of appropriate use of this outcome are when:</p> <ol style="list-style-type: none">1. The job analysis is not ready for submission by the due date,2. The employer was not available to give the requested information, or3. The VRC assigned to the referral was not available to complete the referral due to situations such as illness. <p>Job Analyses that do not meet the requirements of WAC 296-19A-170 will be closed with JA02 and may be subject to corrective action per WAC 296-19A-270.</p>
ADM4: Assigned VRC no longer available.	VRC leaves the profession and is no longer accepting referrals. All referrals must be closed.
ADM8: VRC leaves the firm.	The VRC leaves a firm with whom he or she had a payee provider relationship and the referral was either made to 1) the vocational firm or 2) a VRC who can no longer perform service in the geographical area.
ADMA: VRC declines the referral.	A VRC may send a referral back to the department if no bills have been paid.

Note: The outcomes listed above are not eligible for dispute rights.

What are the billing rules?

This service will be subject to a fee cap. This cap will be set in the department's Fee Schedule.

This referral type is limited to 15 days from the date the referral was electronically created by the claim manager. Bills for dates of service beyond the 15th day will not be paid.

What billing form should be used to bill the department?

This service should be billed with the department's Statement for Miscellaneous Services bill form (form number F245-072-000).

Providers must follow the billing procedures in the Billing Instructions for the Miscellaneous Services Bill Form. Copies of the Instructions can be obtained by contacting the Provider Hotline at 1-800-848-0811.

What are the Stand Alone Job Analysis billing codes?

Provider Type:	Role:	Billing Code:	Rate:
Vocational Counselor	May receive the referral from the department directly.	0808V – Stand Alone Job Analysis referral, VRC	\$7.71 (per six minute unit)
Vocational Intern	May assist the assigned vocational provider.	0809V – Stand Alone Job Analysis referral, intern	\$6.55 (per six minute unit)
Occupational Therapist, Physical Therapist, or other applicable provider (e.g., industrial hygienist)	May assist the assigned vocational provider.	0378R - Stand Alone Job Analysis, non-voc	\$7.71 (per six minute unit)

NOTE: These rates become effective August 1, 2003. In the future, these rates may be subject to modification as part of the department's annual Cost-of-Living Adjustment (COLA) process, or when adjustments are necessary. If you have questions about the most current rates or fee caps, please call the department's Provider Hotline at 1-800-848-0811.

Provisional Job Analyses

When the department requests a Provisional Job Analysis, the provider is only authorized to conduct a job analysis. The department intends to begin making these requests approximately August 1, 2003. A Provisional Job Analysis is a detailed evaluation of a specific job or type of job, when a claim has not been allowed. Except for the status of the claim, the service delivery expectations are, in all ways, identical to those described in the previous section for Stand Alone Job Analyses:

- The provider must complete and submit the analysis within 15 days of the electronic referral
- This referral is subject to a fee cap.
- The analysis must be conducted on site whenever possible.
- The recommendation codes are identical to those provided in the table in the Stand Alone Job Analysis section of this Bulletin.
- The billing codes and procedures are identical to those provided in the table in the Stand Alone Job Analysis section of this Bulletin.
- Bills are submitted on the Miscellaneous Services bill form (Form number F245-072-000).
- The assigned VRC is responsible for all work completed on the referral.
- Documentation and record-keeping requirements are the same as those described in the Stand Alone Job Analysis section of this Bulletin.
- At this time, the department has no intentions of incorporating any job analysis referral into its provider performance measurement ratings.

A provisional job analysis is not considered a vocational service. Provisional job analyses are requested for adjudicative purposes before a decision to allow the claim has been made. Therefore, these claimants are not eligible for vocational services.

What additional resources are available?

The department's **Provider Hotline** at 1-800-848-0811 can assist you if you do not have Internet access.

More information about vocational services and service delivery expectations is available at <http://www.lni.wa.gov/hsa/voc/default.htm>.

You can access all of the department's active **Provider Bulletins and Provider Updates** on-line at the following address: <http://www.lni.wa.gov/hsa/ProvBulletins/PbAmaAgree.htm>

The department publishes its' **Medical Aid Rules and Fee Schedule** annually. You can also reference vocational codes, rates, and other information by consulting the "Specialty and Administrative Services" section of the Fee Schedules on-line at the following address: <http://www.lni.wa.gov/hsa/payment.htm>.

To obtain a copy of the Fee Schedules on CD, contact the Provider Hotline at 1-800-848-0811.